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Background Adverse effects of Intimate Partner Violence (IPV) during pregnancy on maternal and child health are increasingly recognised as an important public health issue.

Purpose To review the multiple maternal and neonatal outcomes associated with physical, sexual and emotional/psychological/verbal IPV exerted during pregnancy and quantify any related impacts.

Methods A predefined search algorithm was used to retrieve Medline publications in English during the last 25 years, followed by manual search of references. Studies reporting an association between domestic/spousal/intimate partner violence or abuse and adverse obstetric outcomes including low birth weight (LBW), abortion, fetal loss, preterm labor (PTL), preeclampsia and bleeding were included.

Results Individual studies have associated any IPV type history with LBW and PTL, whereas sexual IPV was associated with increased risk of third trimester bleeding, emotional IPV with pre-eclampsia and physical IPV with both bleeding and PTL. Moreover, physical and sexual IPV increased the risk for induced abortion, whereas emotional IPV had a strong association with spontaneous fetal loss. Physical or sexual violence was strongly associated with obstetric problems in general, premature rupture of membranes, direct physical trauma and fetal injury, in particular. Lastly, the likelihood to obtain prenatal care is suboptimal, whereas increased stress levels and postpartum depression have been also observed.

Significance Association of IPV with adverse clinical/psychological outcomes for mothers/children has been already examined, although quantification of the burden is hampered by high heterogeneity levels. Since pregnancy represents a window of opportunity to identify IPV, screening programs and effective interventions should be part of health routines.